

The Parkland Memorial Program provides individuals, groups and organizations with the opportunity to beautify Parkland in Strathcona County by planting trees or installing Parkland Amenities in remembrance, observance or acknowledgement of an appropriate event, occasion or individual.

Requests are accepted year-round. Parkland Amenities may be installed May through September and trees are planted in the spring and fall. A plaque is installed with the Parkland Amenity or tree to serve as a lasting tribute.

Contact Information

Last Name _____ Middle Name _____ First Name _____
(Print) (Required) (Print) (Print)

Address _____
Street and Number City/Town Province Postal Code

Contact Phone Number _____ Alternate Phone Number _____
(if applicable)

Email Address _____ Website Address _____

Group / Organization _____

Note: If the applicant is part of an organization, the person must have authority to make this application

Application Information

Which park would you like the memorial to be in? _____
(Broadmoor Lake Park and Smeltzer House are not considering new applications)

Do you have a specific location(s) selected? no yes ► please specify and provide an overhead map indicating the exact location(s), if possible

Please note that final approval of a memorial location is dependent on Strathcona County approval and utility locate clearance.

What item would you like to purchase? tree new bench existing bench re-skin

Plaque Information

Please provide your plaque dedication message here (limit of 20 – 25 words).

Collection and use

Personal information is collected under the authority of section 33(c) of the *Freedom of Information and Protection of Privacy Act* and will be used for managing and administering the Parkland Memorial Program. If you have questions about the collection, use or disclosure of this information, contact the Manager of Finance and Business Operations, Recreation, Parks and Culture, Strathcona County at 780-467-2211.

Parkland Memorial – Application

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Terms and Conditions

The Applicant, _____ has agreed to purchase
Print full name

tree new bench existing bench re-skin

for installation at _____.

Both parties agree to the following responsibilities:

The Applicant, _____, shall:
Print full name

1. Make their Parkland Memorial Program payment to Strathcona County in advance of the Parkland Amenity or tree being ordered.
2. Make all arrangements and assume any expenses related to any commemoration or dedication ceremony.
3. Be able to request a re-staining of furnishing wood, if applicable, five (5) years after installation and every five (5) years thereafter. Re-staining will not be guaranteed to colour-match the original.
4. Identify and hold harmless, Strathcona County, its agents, servants and employees from and against all actions, suits, proceedings, or judgments taken against the County based on the construction and installation of the amenities undertaken by the County, unless such action, suit, proceeding or judgment was due to the negligent acts or omissions of Strathcona County, its employees, agents or servants.

Strathcona County shall be responsible for:

1. The purchase and installation or planting of the agreed upon Parkland Amenity or tree and any other work involved within the memorial project. Such responsibility will include securing the construction site in a manner that is safe for the people who are using the park.
2. Ensuring that the selection and installation of the Parkland Amenity or tree is properly carried out according to Strathcona County's Open Space Development Standards.
3. Identify and hold harmless the applicant, his / her agents, servants and employees from and against all actions, proceedings or judgments taken against the applicant based on the construction and installation of the amenities undertaken by the County, unless such action, suit, proceeding or judgment was due to the negligent act or omission of the applicant, his employees, agents or servants.

In witness whereof the parties hereto sign this Agreement on the day and year written below.

Applicant Name (please print)

Signature

Date

Office use only

Date paid: _____ Approved by: _____ Date: _____